

#### ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

MAD 980 910 046

NEW ENGLAND TELEPHONE COMPANY
185 FRANKLIN ST ROOM 309A
BOSTON MA 02107

INSTALLATION ADDRESS

93 PLEASANT: VALLEY
MATHUEN MA 01844

EPA Form 8700-12B (4-80)

05/01/86

FILE NC.		DONE BY:	- 1/
	_	DATE:	
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# COMMONWEALTH OF MASSACHUSETTS APR Department of Environmental Quality Engineering



NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

For	Official Use Only  INSTALLATION'S EPA I.D. NUMBER  DATE ISSUED  mo. day year
	MAD 980910046 T
Prin	t or type with ELITE type (12 characters/inch) in the boxes. Refer to Line-by-Line Instructions.  NAME OF INSTALLATION (Do not punctuate or use initials)  NEW ENGLAND TELEPHONE COMPANY  INSTALLATION MAILING ADDRESS  Street or Post Office Box
*	185 FRANKLIN STREET ROOM 309A
ĮII.	City or Town  State  Zip Code  MA  0 2 1 0 7 -  LOCATION OF INSTALLATION  Street or Route Number
	93 PLEASAWT VALLEY 1 ESSEL
	City or Town         State         Zip Code         N           METHUER         M4         01844-
IV.	PRINCIPAL ACTIVITY 4 digit SIC number Description 4 digit SIC number Description 7 3 9 9 UTILITY
V.	INSTALLATION CONTACT Name (last, first)  Title  MOTOR VEHICLE DEPT  STAFF MGR 6177433901
VI.	OWNERSHIP  Name of Installation's Legal Owner  NEW ENGLAND TELEPHONE COMPANY FEDERAL NON-FEDERAL NAME of the Legal Owner of the Property  TR. OF  GILBERT G CAMPBELL CHARLES T MATSES CAMMAT REAU
VII.	TYPE OF HAZARDOUS WASTE ACTIVITY Enter X on the appropriate line.
_	Hazardous Waste Activity Waste Fuel Activity Waste Fuel Burning
matron metro	Large quantity generator  Cenerator marketing to burner  If a burner, specify:  X Small quantity generator  Other marketer  Dutility boiler  Transporter *  Burner **  Industrial boiler  Treater/Storer/Disposer *  Hazardous waste fuel  *A Massachusetts license is required  Off-specification used oil fuel  *A Massachusetts license is required  Type of Combustion Device  It a burner, specify:  Industrial boiler  Industrial furnace  Hazardous waste fuel
	* A Massachusetts license is required Off-specification used oil fuel ** A Massachusetts recycling permit is required Specification used oil fuel

VIII.DESCRIPTION OF HAZARDOUS WASTES  Enter the four-digit number from the Massachusetts Regulations 310 CMR for each listed hazardous waste which your installation handles. Use additional sheets if necessary.				
D codes - Characteristic Non-Listed Hazardous Wastes. See 30.121 through 30.125.				
F and M codes - Hazardous Wastes from Non-Specific Sources. See 30.131.				
MOO1 III III III				
K codes - Hazardous Wastes from Specific Sources. See 30.132.				
U codes - Commercial Chemical Product Hazardous Wastes. See 30.133.				
P codes - Acutely Hazardous Wastes. See 30.136.				
IX. COMMENTS				
☐ Sheet Attached				
X. CERTIFICATION				
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.				
In addition, I understand that any material supplied with this application will not be considered confidential unless I have specifically requested that such material be kept confidential and and the Department has made a determination of confidentiality in accordance with 310 CiviR 3.00, Regulations Governing Access to and Confidentiality of Department Records and Files under the Hazardous Waste Management Act.				
SIGNATURE NAME & OFFICIAL TITLE (type or print) DATE SIGNED				
Gary M. Schmitz, Asst. 3-5-86. Staff Mgr.				

## UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION I

DATE: January 22, 1985

SUBJ Deletion of New England Telephone from the Data Base

FROM: Lynn Cusick

TO: Ira Leighton

In a memo dated November 15, 1984 (Attachment 1) from Nancy Wrenn to Gary Gosbee, DEQE requested that EPA delete New England Telephone from the Data Base because they no longer generate hazardous waste. A Certification Statement for the deletion of an EPA I.D. Number is enclosed with a list of the companies that were deleted (Attachment 2).

EPA has deleted these companies' identification numbers on January 17, 1985.

#### ATTACHMENT I



# The Commonwealth of Massachusetts Executive Office of Environmental Affairs Department of Environmental Quality Engineering Division of Hazardous Waste One Winter Street, Boston, Mass. 02108

TO: Gary Gosbee

FROM: Nancy Wrenn

THROUGH: Linda Benevides

DATE: November 15, 1984

RE: Changes of Status

Gamewell Corp.

Honeywell, Inc.

Opt vac, Inc.

Koehler Mfg. Co.

Gavitt Wire & Cable Co.

New England Plating Co.

The following changes have been made in our data base:

Medway

Brookfield

Marlboro

Worcester

Carrington, G.S. Co./Artfaire, Inc. Leominster MAD055740765 Deleted

J.P. Stevens Easthampton Delete MAD079219275; Retain MAD990809147 (2 ID's as Region 1: wrong one deleted)

Region 1:		wrong one deleted)
Adams Specialty & Printing Co., Adams	MAD002082923	G - Delete
Alliance Editions No. Adams		G - Delete
American Electric Cable Holyoke		G - SQG
Atlas Copco, 161 L. Westfield Holyoke		TSD - G
Barnack Roofing/Nack Industries W. Spr.	ingfield MAD066983883	G - Delete
Curtis Business Forms Holyoke		G - Delete
DFM Corporation W. Springfield		G - SQG
Farm Petroleum Co., Inc. Hadley		G - Delete
Friendly Ice Cream Corp. Wilbraham		G - Delete
Hampden Fence Supply, Inc. Agawam		G - Delete
Leyden Energy Conservation Corp Leyder	n MAD079238598	G - Delete
Luster-on-Products, Inc. Springfield		G - SQG
Premat Corp. W. Springfield	MAD047226683	G - SQG
Renovators Supply Millers Falls	MAD087446498	G - SQG
Sinauer Assoc. Sunderland	MAD049592363	G - Delete
Tenneco Oil Co. Springfield		G - Delete
U. of Mass. Belchertown	MAD000844654	G - SQG
West Springfield Station	MAD000844589	Amend Pt A - SO <sub>1</sub>
Baystate Medical Center Springfield	MAD079237988	G - SQG
Westfield Gage Co. Westfield	MAD001119924	G - SQG
Region 2:		
Denardo Wire & Cable Co. Fitchburg	MAD097444020	G - SQG

MAD091496166

MAD055738538

MAD001013663

MAD001132331

Marlboro MAD059712901

N. Brookfield MAD001438555

G - Delete

SQG - Delete

TSD -SQG/WWTU

TSD - G/WWTU

TSD - SQG

G - SQG

Region	2	(cont.)
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Shipley Co., Inc.	Marlboro	MAD000844498	TSD - G
Trubor Co.	W. Boylston	MAD005433417	G - SQG
Worcester State Hosp.	Worcester	MAD021001888	G - Delete

#### Region 3:

	Bentley Warren Trucking Inc.	Ipswich	MAD059730671	G/Trans - Trans on
	Compensated Devices, Inc.	Melrose	MAD076604248	TSD - SQG
1		Lowell	MAD001408475	TSD - G
	GTE Products Corp.	Ipswich	MAD069348829	TSD = SQG
	General Tire & Rubber Co.	Lawrence	MAD001017599	TSD - G
	Pierce Bros. Oil Service, Inc.	Waltham	MAD062187455	- Trans only
	Reid Assoc.	Woburn	MAD059711226	G - Delete
	Saunders Asbestos Service	Chelsea	MAD980521215	TSD/Trans - Delete
J	Standard Thomson Corp.	Waltham	MAD001038256	TSD - SQG
	Texaco Petroleum Products	Danvers	MAD000844704	TSD - Delete
	Vulcan Corp.	Amesbury	MAD043412899	TSD - Delete
/	Wentworth Institute	Boston	MAD044814606	TSD - SQG
J	Westinghouse Electric Corp.	Framingham	MAD004502316	G - SQG
-4	his warm prove sucht		***	

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#### Region 4:

Alberox Corp. Lakeville Hospital North Attleboro Taps, Inc. Harvey Probber, Inc. Reed & Barton Corp.	New Bedford Lakeville N. Attlaboro Fall River Taunton	MAD001061001 MAD070606520 MAD041281122 MAD001034035 MAD001011071	G - SQG G - SQG TSD - SQG TSD - SQG TSD - G/WWTU TSD - SQG
Roman Company	Attleboro	MAD990893968	TSD - SQG

In addition, the following groups have been deleted:

#### Corrections:

Change in Name of Company:

Bendix Industrial Tools Division (MADO41490673) to Besly Products Corp.

Companies which should be listed in EPA's data base as SQG's:

Butler Automatic Inc. 480 Neponset St., Canton MAD001033752
Cambridge Research Lab. 195 Albany St., Cambridge MAD980732820
Koro Corp. 560 Main St., Hudson MAD001408624
Hamamatsu Systems, Inc. 40 Bear Hill Rd., Waltham MAD069342061
International Marine Instruments, 3 Republic Rd., N. Billerica MAD060091204
Tom Chevrolet 391 Providence Hwy, Norwood MAD980734867
Design Mark Corp. 3 Kendrick Rd. Wareham

cc: DEQE Manifest Staff

#### ATTACHMENT II

TO: State Waste Program U.S. Environmental Protection Agency JFK Federal Building Boston, MA 02203

Division of Hazardous Waste Department of Environmental Quality Engineering 1 Winter Street Boston, MA 02108

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CERTIFICATION STATEMENT
To Delete the EPA ID Number
TO UITAZARDON W.
I, Arthur P. McSweeney , Manager , hereby
(Name) Please print (Position)
certify that New England Telephone, at the addresses listed on the (Name of Company and Address)
attached, which notified the U.S. Environmental Protection
(EPA ID Number)
Agency (EPA) that it generates over 1,000 kilograms of hazardous waste per
month, or 1 kilogram of acutely hazardous waste, at all times from this date
forward will not accumulate at any one time more than 20 kilograms of
hazardous waste, or any acutely hazardous waste, and will comply with all
other applicable requirements of 310 CMR 30.000. I hereby request a change
to delete the EPA ID Number.
I understand that the Department of Environmental Quality Engineering
may inspect to verify our hazardous waste activity status and I am aware
that there are significant penalties for submitting false information,
including fines and imprisonment.
I certify under penalty of law that I have personally examined and
am familiar with the information submitted in this document and all
attachments and that, based on my inquiry of those individuals immediately
responsible for obtaining the information, I believe that the information
is true, accurate and complete.
Office Address (if company has moved):
245 State Street / Signature / Signature
Boston, MA. 02109 November 7, 1984

Date

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Please print or type with ELITE * oe (12 characters/inch) in the unshaded areas only.	GSA No. 0246-EPA-OT
SEPA NOTIFICATION OF HAZARDOUS WASTE ACTIVITY	INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the
TION'S EPA LD. NO	information on the label is incorrect, draw a line through it and supply the correct information
I. STALL ATION	in the appropriate section below. If the label is complete and correct, leave Items [. II, and III below blank, If you did not receive a preprinted
II. TION PLEASE PLACE LABEL IN THIS SPACE	label, complete all items, "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a trans-
	porter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFI- CATION before completing this form. The
III. OF INSTALL.	information requested herein is required by law (Section 3010 of the Resource Conservation and
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FOR OFFICIAL USE ONLY COMMENTS COMMENTS	Ne dojakalawizwajadaan <mark>zuPiwa</mark> a
INSTAL 98-091-0046 APPROVED DATE RECEIVED (yr., mo., & day)	
I. NAME OF INSTALLATION  NEW ENGLAND TO LEDWONE GROOGE	
II. INSTALLATION MAILING ADDRESS	
STREET OR P.O. BOX	
3 245 STATE STREET RM1101-4	5 728 35 25 35
4BOSTON ST. ZIPO	109 E
III. LOCATION OF INSTALLATION	51
STREET OR ROUTE NUMBER  9 9 PIEASANT VALLEY ROUTE	
	ODE
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NAME AND TITLE (last, first, & job title)	PHONE NO. (area code & no.)
V. OWNERSHIP	5 46 - 18 - 51 - 51 - 52 - 55
A. NAME OF INSTALLATION'S LEGAL OWNER	Manager Banks State 1774
FORMER ENGLINION LIEFENHOUS IIIIII	55
Wa. GENERATION SOLA OUT B. TR	er "X" in the appropriate box(es))
M = NON-FEDERAL C. TREAT/STORE/DISPOSE D. UN	DERGROUND INJECTION
VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate bo.	Manager and the second of the
VIII. FIRST OR SUBSEQUENT NOTIFICATION	
Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazard If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below	dous waste activity or a subsequent notification.
	C. INSTALLATION'S EPA I.D. NO.
A. FIRST NOTIFICATION B. SUBSEQUENT NOTIFICATION (complete item C	
IX. DESCRIPTION OF HAZARDOUS WASTES  Please go to the reverse of this form and provide the requested information.	garana ayan ayan ayan ayan aran aran aran

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I delieve that the	submitted inform	nation is true, accur	rate, and complete	mmediately responsi I am aware that thei	ble for obtaining the e are significant pen	information,
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EPA Form 8700-12 (6-80) REVERSE